					Application or Docket Number					
	PATENT A	APPLICATIO	N FEE DI							
		CLAIMS AS	S FILED - column 1)	SMAI TYP	LL ENTITY	OR	OTHER SMALL	THAN		
FC	SR	NUMBE	R FILED	NUMBER	EXTRA	RATI		7	RATE	FEE
ВА	SIC FEE					Z		OR		
TO	TAL CLAIMS		minus	20= *			OR			
IND	EPENDENT CL	AMS	minus	3 = *			\overline{X}	OR		
MU	LTIPLE DEPEN	IDENT CLAIM PF	RESENT			1		1		\
* If	the difference	in column 1 is	less than ze	ero, enter "0" in c	column 2	TOTA	π /	OR		
CLAIMS AS AMENDED - PART II (Column 1) (Column 3)							<u> </u>	7	OTHER	THAN
4	-11-05	(Column 1)		(Column 2)	(Column 3)	SMAI	LL ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	* 20	Minus	** 54	= 0	2	5 0	OR		1
AME	Independent	* 7	Minus	***	= 0	100	0 0	OR		
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	.]	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)		1.4001	1		1501
NDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AME	Independent	*	Minus	***	= .	}	1	1		
9	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT CLAIM			_	OR		
			•					OR	-2-4	<u></u>
						ADDIT. F		OR	TOTAL ADDIT. FEE	<u></u>
		(Column 1)	T	(Column 2)	(Column 3)			_		
AMENDMENT C	,	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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ME	Independent	*	Minus	444	=		- 			l
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** ADDIT. FEE									TOTAL ADDIT: FEE	
_	The "Highest Num	hoer Previously Pal	id For (Total o	ns of which is the property is the	an 3, errer "3." e highest number f	ound in the	appropriate box	x in col	lumn 1.	

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MULTIPLE DEPENDENT CLAIM PRESE						•	•			7		1	OR		7			
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"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." AD "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 8, enter "2."										DOIT FEE	ئاة		OR ,	DOTT. FEE				